PROF CORPOR ANNUAL F 199 OCUMEI	ATION REPORT			RTMENT OF STATE	May 15 19	08 8.000
ANNUAL F 199 OCUMEI	REPORT			D. Maradhana		70 0.000
	<b>8</b> ×		Sandra B. Mortham Secretary of State		Secretary of State	
	Ý	Con us ser	DIVISION OF CORPORATIONS			
MEDITERRA	NT # <b>P97</b>	000054	4258 (3)	)		
	NEAN FOOD MA	ARTS, INCORF	PORATED		1 (ABILBD1 (10 (A1)) (BAIL (A1)) (BAIL (BAIL) (BAIL)	
cipal Place of Bu 9 GULF TO BAY	BLVD #324		ing Address 8 GULF TO BAY BLV	VD #324		
EARWATER FL 34619			ARWATER FL 34619		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 06/19/1997	
rincipal Place of	Business		Aailing Address		4. FEI Number 59-34532.68	Applied For
uite, Apt. #, etc.	· ··· - · · · · · · · · · · · · · · · ·		Suite, Apt. #, etc.		5, Certificate of Status Desired	88.75 Additional
ity & State		27]	ity & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
p	Country	28 Z	'ip	Country	Trust Fund Contribution	Added to Fees
1.0	25 lame and Address of	[29] Current Register	red Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
KHADER,	IBRAHIM	· · · · · · · · ·	·	81 Name	SRAHIM KHADER	
	LF TO BAY BLVD # Ater FL 34619	324		82 Street Add	GULF TU BAY BLVD	#324
				83		
				<sup>84</sup> CLEF	ARWATER FI	L 85 Zip Code 33769
Pursuant to the p office or register	provisions of Sections and agent, or both, in the iar with, and accept the	607.0502 and 607 he State of Florida	.1508, Florida Statu Such change was	ites, the above-named con authorized by the corpora	rporation submits this statement for the purpose ation's board of directors. I heroby accept the ap	of changing its registered pointment as registered
ATURE	· · · · · · · · · · · · · · · · · · ·	-			4/23	198
Signature	and a second	ERS AND DIRECT	ORS	1E: Registored Agent signature requ 13.	ADDITIONS/CHANGES TO OFFICERS AN	
181	K Inani Vini	der.		1.1 TITLE 1.2 NAME		Change LI Addition
ADDRESS 311	ACULF TO	BAY BL	rb #324	1.3 STREET ADDRESS		
st-zip Gie	ARWATER	FL 337	159 DELETE	1.4 CITY - ST - ZIP		
				2.1 TITLE 2.2 NAME		Change Addition
ADDRESS				2.3 STREET ADDRESS		
ST-ZIP				2 4 CITY-ST-ZIP		
			DELETE	3 1 TITLE		Change Addition
ADDRESS				3.2 NAME 3.3 STREET ADDRESS		
ST-ZIP				3.4. CHTY - ST - ZIP		
			DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
				4. 2 NAME		
ADDRESS				4.3 STREET ADDRESS		
17-ZIP				4.4 C(TY - ST - Z(P 5.1 T)TLE		Change 🔲 Addition
				5.2 NAME		
ADDRESS				5.3 STREET ADDRESS		
IT-ZIP				5.4 CITY - ST - ZIP		
			DELETE	6.1 TITLE	····· ··· ··· ··· ··· ··· ··· ··· ···	Change 🔲 Addition
				6.2 NAME		
ADDRESS				6.3 STREET ADDRESS		
ST-ZIP	at the information sur-	ablied with this film	a does not qualify f	6.4 CITY-ST-ZIP	n Section 119.07(3)(i), Florida Statutes. I further of	partify that the information